IVAN D. GALVAN, G56074	_
Name and Prisoner/Booking Number  California State Prison - SOLANO  Place of Confinement	_
2100 Peabody Road, C-16-155-Low	-
VACaville. California 95696	FILED
City, State, Zip Code In PRO SE  (Failure to notify the Court of your change of address may result	in dismissal of this action.)  Aug 01, 2022  CLERK, U.S. DISTRICT COURT  EASTERN DISTRICT OF CALIFORNIA
	TES DISTRICT COURT STRICT OF CALIFORNIA
TVAN DEJESUSVALTE GALVAN (Full Name of Plaintiff) Plaintiff,	) ) )
v.	) CASE NO. 2:22-cv-1359-DMC (PC)
(1) V. MILASTOH, et al	(To be supplied by the Clerk)
(Full Name of Defendant)	JURY TRIAL DEMNDED
(2)	CIVIL RIGHTS COMPLAINT
(3)	BY A PRISONER
(4)	) ► <b>⊠</b> Original Complaint
Defendant(s).	☐First Amended Complaint
Check if there are additional Defendants and attach page I-A listing them.	☐Second Amended Complaint
A. JURIS	DICTION
1. This Court has jurisdiction over this action pursuant	t to:
	Federal Narcotics Agents, 403 U.S. 388 (1971).
Other:	
2. Institution/city where violation occurred: PleaSan	t VAlley State Prison

# B. DEFENDANTS

1.	1. Name of first Defendant: V. MILASICH, et al., The first Defendant is employed Truck delivery Person at Pleasant Valley State Prison	
	(Position and Title)	Pleasant Valley State Prisan (Institution)
2.		The second Defendant is employed as:
	(Position and Title)	(Institution)
3.		. The third Defendant is employed as:
	(Position and Title)	(Institution)
4.	Name of fourth Defendant:	. The fourth Defendant is employed as:
	(Position and Title)	(Institution)
If yo	ou name more than four Defendants, answer the questions listed above for	r each additional Defendant on a separate page.
	C. PREVIOUS LAWS	UITS
1.	Have you filed any other lawsuits while you were a prisoner?	Yes 🗵 No
2.	If yes, how many lawsuits have you filed? Describe t	he previous lawsuits:
	<ul> <li>a. First prior lawsuit: <ol> <li>Parties:</li></ol></li></ul>	? Is it still pending?)
	b. Second prior lawsuit:  1. Parties:	•
	c. Third prior lawsuit:  1. Parties:v  2. Court and case number:  3. Result: (Was the case dismissed? Was it appealed?	Is it still pending?)

If you filed more than three lawsuits, answer the questions listed above for each additional lawsuit on a separate page.

# D. CAUSE OF ACTION

1	State the constitutional or other fodoral similarish that was in the FTCUTH (9th) Amandra of
u	State the constitutional or other federal civil right that was violated: <u>ETGHTH (8th) Amendment</u> wites states constitution; Cruel and unusual Punishment
2.	Claim I. Identify the issue involved. Check only one. State additional issues in separate claims.  Basic necessities Mail Access to the court Medical care Disciplinary proceedings Property Exercise of religion Retaliation  Excessive force by an officer Threat to safety Other:
3. Defeauth	Supporting Facts. State as briefly as possible the FACTS supporting Claim I. Describe exactly what each endant did or did not do that violated your rights. State the facts clearly in your own words without citing legal ority or arguments.  That, on Augest 21, 2020 While working on the back dock of
ta	art Sull of ford struck Me in the head, As I was on the fore truck when
food	d carts to be Loweved and removed from the food truck, V. milasich
The	truck forward in Stead of Lowening it, This action caused
5/10	Pring mechanism was not engaged by U, Milasich the
Cau	se of this Plaintiff's Physical insure, a springerment was the
In a	my forehead and scalf which required to sutures and 1-Staple
Plan	
see	EX-15) The IN-Prison-conditions cases that State of mind is one
of d	elsocrate indifference to immate Health or Safety.
V. 1	injury. State how you were injured by the actions or inactions of the Defendant(s).  I lasich, cle fewdawt et also, engaged the button that tilted the vamp on the district which caused the food cant to fall ontop of my head, ross and reckless manuever on his fart which caused my thysical inde-
a	Administrative Remedies:  Administrative Remedies:  Are there any administrative remedies (grievance procedures or administrative appeals) available at your institution?  Yes \(\sigma\) No
b	Yes I No
c d	Yes No

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1		State the constitutional or other federal civil right that was violated:		
2.	] [	Claim II. Identify the issue involved. Check only one. State additional issues in separa  Basic necessities	Medical Retaliation	care
3. D au	S efen	Supporting Facts. State as briefly as possible the FACTS supporting Claim II. Describe ident did or did not do that violated your rights. State the facts clearly in your own words rity or arguments.	a avantle	ت د مان
	In	ings State house and in the state of the sta		*
r,	111	jury. State how you were injured by the actions or inactions of the Defendant(s).		
	Ad a.	Iministrative Remedies. Are there any administrative remedies (grievance procedures or administrative appeals) institution?	available	
	b.	Did you submit a request for administrative relief on Claim II?	Yes	□ No
	c.	Did you appeal your request for relief on Claim II to the highest level?	☐ Yes	□No
	d.	If you did not submit or appeal a request for administrative relief at any level, briefly did not.	explain wl	ny you

1	. S	CLAIM III State the constitutional or other federal civil right that was violated:		
2.	. (	Claim III. Identify the issue involved. Check only one. State additional issues in separate of Basic necessities	dical c	are n
3, D au	eren	Supporting Facts. State as briefly as possible the FACTS supporting Claim III. Describe exandant did or did not do that violated your rights. State the facts clearly in your own words with rity or arguments.	ctly w out cit	hat each ing lega
_				
4.	T:			
+,	111]	njury. State how you were injured by the actions or inactions of the Defendant(s).		
5.	Ad a.	i di di di		at your
	b.			
	c. d.	Ditt.	Yes	ΠNo

If you assert more than three Claims, answer the questions listed above for each additional Claim on a separate page.

### E. REQUEST FOR RELIEF

State the relief you are seeking:
1. Plaintiff 15 Seeking # 3,5 million dollars in Monetary Relief
2. Plaintiff is also seeking a \$1000,000, (million) dollar lien against
V. MILASICH Residential Property, Real Property "i.e. House, Cars, Boats
motorcycles, ANPlaine's, helicoptor's etc., and against Defendants personal
Checking accountist, saling's accounts until the Lawsuit is finalized
and/or settled. Which ever comes first. 3. finally, lawtiff is
requesting allointment of counsel
I dealers under constitut Control of Control
I declare under penalty of perjury that the foregoing is true and correct.
Executed on 8-1-2022 TIAN GANAN
DATE SIGNATURE OF PLAINTIFF IVAU D. GALVAN,
INIU DI CILVIVIII
(Name and title of paralegal, legal assistant, or
other person who helped prepare this complaint)
· · · · · · · · · · · · · · · · · · ·
$\cdot$
(Signature of attorney, if any)
(Attorney) and June 9 to July 1
(Attorney's address & telephone number)

#### ADDITIONAL PAGES

All questions must be answered concisely in the proper space on the form. If you need more space you may attach more pages, but you are strongly encouraged to limit your complaint to twenty-five pages. If you attach additional pages, be sure to identify which section of the complaint is being continued and number all pages. Remember, there is no need to attach exhibits to your complaint.